

THE
YEADON URBAN DISTRICT COUNCIL.

Area in Acres 1723.

Population (1891) 7396.

Estimated Population (middle 1895) 7796.

Inhabited Houses 1734.

Empty Houses 40.

Rateable Value } Poor Law £21,077 4s. 9d.
Buildings & Land £18,280 15s. 4½d.

MEDICAL OFFICER'S
ANNUAL REPORT
1895.

SIGNED,
CHAS. J. R. McLEAN, M.D. EDIN., M.Ch., D.P.H.,
MEDICAL OFFICER OF HEALTH.

TWEED HOUSE, YEADON,
5th Feb., 1896.

W. WALMSLEY, PRINTER, YEADON.

TO THE CHAIRMAN AND MEMBERS

OF THE

Yeadon Urban District Council.

ANNUAL REPORT.

GENTLEMEN :

I beg to lay before you my Report on the health and Sanitary condition of the district for the year ending 31st December, 1895.

The Population of the township is estimated at 7,796, though I suspect that this is too high a figure. Were a census taken every five instead of every ten years, much of this uncertainty would be removed.

During the twelve months there were registered 111 deaths, 53 males, and 58 females, yielding a *Death-rate* of 14·2 per thousand of population per annum.

During the same period 240 births were recorded, 118 males and 122 females, giving a *Birth-rate* of 30·7 per thousand per annum.

Of the births, 7 were illegitimate, 2 males and 5 females, equal to 2·9 per cent of the total births, or 0·89 per thousand of population living. This rate is below the average for England generally.

DEATH-RATE. The Death-Rate for the year is exceptionally satisfactory, and is the lowest for over ten years (see Table 1), being no less than 3·2 per thousand below the average for that period. This reduction in the death-rate is accounted for by fewer deaths resulting from Diseases of the Respiratory, Circulatory, and Alimentary Systems, there being in 1895 only 26 deaths from these diseases, as against 49 in 1894, and 62 in 1893 (see Table 6).

CORRECTED DEATH-RATE. During the year there were 4 deaths of persons belonging to, or residents of Yeadon, registered in various institutions outside, and on the other hand 5 persons died in Yeadon who did not belong to the township, thereby reducing the above mentioned death-rate to the still more satisfactory figure of 14 per 1000.

INFANTILE MORTALITY. During the year there were 24 deaths in children under one year old, yielding an Infantile death-rate of exactly 100 per thousand *Births* (10 per cent). This is the lowest since the year 1890, when the rate was 95; and is as much as 26·5 below the average for the ten preceding years. The rate for the third quarter of the year viz: 29·8 is the lowest of which I have any record.

TABLE 1.

	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	Average for 10 Years
Death-rate per 1000 of } Population Living }	20·2	17·2	14·8	18·7	20·6	18·5	16·3	18·4	15·8	14·2	17·4
Death-rate corrected for } Residents & Non-Residents }								18·4	16·7	14·0	
Infantile Death-rate per } 1000 BIRTHS }	144·1	121·4	82·9	149·3	95·0	112·0	162·7	143·4	154·9	100·0	126·5
Birth-rate per 1000 of } Population Living }	32·5	37·8	35·0	21·7	31·4	28·9	27·7	31·6	28·2	30·7	30·5

MEAN AGE AT DEATH. The average age at death of males was 37·9 and of females 35·6, together equal to 36·7 years, which shows a slight increase over the average age at death for some years past

TABLE 2.

MEAN AGE AT DEATH:—				
	1892	1893	1894	1895
Males	31·7 years	33·3 years	29·8 years	37·9 years
Females	33·7 "	40 "	34·7 "	35·6 "
Average	32·7 "	36·6 "	32·2 "	36·7 "

BIRTH-RATE. The birth-rate of 30·7 which is 0·2 above the average for the ten preceding years is satisfactory. During the second quarter of the year this rate was very low, viz: 24·8, but there was a satisfactory increase in the third quarter, viz: 35·4.

TABLE 3.

	No. of Deaths	Rate per 1000 Population	No. of Births	Rate per 1000 Population
1st Quarter, 1895	37	19·6	65	34·4
2nd " "	23	12·1	47	24·8
3rd " "	23	12·1	67	35·4
4th " "	28	14·3	61	31·2
Total	111	14·2 Average	240	30·7 Average

The total rates vary slightly from the Quarterly Averages due to correction for estimated population.

TABLE 4.

OF THE AGES AT DEATH THERE WERE:—					
	1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total
Under one Year	10	7	2	5	24
Over 1 year and under 5 years	6	1	0	4	11
„ 5 „ „ 15 „	0	1	2	0	3
„ 15 „ „ 25 „	4	0	3	4	11
„ 25 „ „ 65 „	7	7	12	8	34
Of 65 years and upwards	10	7	4	7	28
Total	37	23	23	28	111
Estimated Population	{ Death-rate	19·6	12·1	12·1	14·2
	{ Birth-rate	34·4	24·8	35·4	31·2
Infantile Death-rate per 1000 Births	153·8	148·9	29·8	81·9	100·0

TABLE 5.

THE CAUSES OF DEATH WERE AS FOLLOWS:—												
I. ORDINARY DISEASES (96)—						1st Qr.	2nd Qr.	3rd Qr.	4th Qr.	Total	Rate per 1000	
Diseases of the Respiratory System						10	0	1	4	15	1·92	
„ „ Circulatory & Urinary System						2	2	5	0	9	1·15	
„ „ Nervous System						7	7	4	4	22	2·81	
„ „ Alimentary „						0	1	0	1	2	·25	
Diseases of Parturition... ..						0	0	0	0	0	·0	
Phthisis Pulmonalis (consumption of lungs) ...						3	1	5	5	14	1·79	
Cancer						1	2	3	1	7	·89	
Diabetes Mellitus						0	0	1	0	1	·12	
General Tuberculosis						0	0	0	2	2	·25	
Premature Birth						1	1	1	1	4	·51	
Old Age... ..						1	1	1	3	6	·76	
Other Diseases						3	3	0	1	7	·89	
Coroner's Certificate						0	1	1	2	4	·51	
Uncertified						1	1	0	1	3	·38	
II. ZYMOTIC or PREVETABLE DISEASES (15)—												
Erysipelas						1	0	0	0	1	·12	
Diphtheria						0	1	0	0	1	} ·38	
Membranous Croup						0	0	0	2	2		
Diarrhœa						0	0	1	0	1		·12
Influenza						7	2	0	1	10	1·28	} 1·92
Enteric or Typhoid Fever						} 0	} 0	} 0	} 0	} 0	} ·0	
Smallpox												
Scarlet Fever												
Measles												
Whooping Cough												
Total						37	23	23	28	111	14·2	
Rate per 1000						19·6	12·1	12·1	14·3	14·2		

I. Ordinary Diseases.

RESPIRATORY DISEASES (Death-rate 1·92). The reduced number of deaths from these diseases is a satisfactory point, there being only 15, yielding the low death-rate of 1·92 per 1000, and of this number no fewer than 10 occurred during the first quarter of the year (see Table 5). On referring to Table 6 we find that of the last nine years 1895 is the most satisfactory. In 1888 there was 1 death less than last year, but out of a proportionately smaller population. Of the 15 deaths there were 3 due to Inflammation of the lungs, 7 due to Bronchitis and 5 to other diseases of the Respiratory System, and it is to be especially noted, that of the 3 deaths from Pneumonia and 7 from Bronchitis, there were no fewer than 1 of the former and 5 of the latter associated with, and most likely aggravated by that fell disease Influenza.



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TABLE 6.

	1887	1888	1889	1890	1891	1892	1893	1894	1895
Circulatory & Urinary Systems (Deaths)						14	14	14	9
Respiratory System (not Phthisis)	26	14	25	38	34	20	36	25	15
„ „ (Death-rate)					4.6		4.8	3.3	1.9

CIRCULATORY AND URINARY DISEASES (1.13). The death rate from diseases of the Heart and Kidneys also shows a satisfactory decline, the former accounting for 6 deaths and the latter for 3. The death-rate of 1.13 is the lowest for some years.

NERVOUS DISEASES (2.81). This rate is somewhat above that of last year, but considerably under the rate of 1893. Twenty-two deaths occurred under this group, and of these, 8 were of the nature of "Infantile Convulsions and Teething."

DISEASES OF THE ALIMENTARY SYSTEM (0.25). Deaths from these diseases show a reduction, the death-rate of 0.25 being much below the average for the district, and for the country generally.

DISEASES OF PARTURITION (0.0). For the third year in succession we have had no deaths registered as the result of child-birth. This is a most satisfactory point, as the death of a mother invariably subjects the surviving child, or children, to dangers which are otherwise avoided. In 1892 there were 3 cases ending fatally, and in 1891 there was 1 death.

PHTHISIS PULMONALIS (Consumption of the Lungs) (1.79). So far in our list of Ordinary Diseases, there has been (with the exception of Nervous Diseases) a satisfactory decline in the death-rates, but coming now to Consumption of the Lungs we find a marked and sad increase in the mortality, compared with past years.

TABLE 7.

PHTHISIS PULMONALIS.									
	1887	1888	1889	1890	1891	1892	1893	1894	1895
Number of Deaths from Phthisis	9	9	13	13	11	5	5	12	14
Death-rate per 1000 of population	1.3	1.3	1.6	1.6	1.4	.66	.66	1.58	1.79
Average Death-rate, 1887 to 1895 = 1.32.									

The rate of 1.79 shows an increase over that of the year 1894, when it was 1.58, and proves the highest rate of which I have any record. This year's death-rate is no less than 0.47 per thousand above the average of the ten preceding years, a point to which I would draw your attention. The rate is also slightly above that of the country generally, which it decidedly ought not to be, as one would imagine that in a village situated at so high an elevation as Yeadon, the subsoil would be very dry, and conducive to a low mortality from Phthisis; but has the damp, not to say absolutely wet condition of many of our streets and yards, nothing to do with the increase of this disease? It has been clearly shown by Buchanan and others, that Phthisis mortality has a direct relation to dampness of subsoil. If this were a cause in Yeadon, however, we would expect a corresponding increase in the death-rate, from all other Respiratory Diseases, as well as from Phthisis, which is not the case for this year at all events; but from what ever cause this increasing death-rate from Consumption is, it is to be noted with regret.

ACUTE RHEUMATISM. No deaths were recorded from this disease during the year, and although there have been several cases, they were not so numerous as in former years, notably the spring of 1893. This is another disease that is (rightly or wrongly) supposed to be due to wet and cold soils.

CANCER (0.89). This rate is much above that of last year, and like the rate for 1893 is somewhat above the average.

Before going on to consider the Infectious Diseases, I would point out the satisfactory results in the above list of Ordinary Diseases, where there is a marked reduction in the death-rates of all, except in diseases of the Nervous System, Phthisis and Cancer.

II. Zymotic or Preventable Diseases (1.92).

During the year 1895 there were registered 15 deaths from Infectious Diseases, viz: 1 from Erysipelas, 1 from Choleraic Diarrhoea, 1 from Diphtheria, 2 from Membranous Croup, and no less than 10 from Influenza. There were no deaths the result of Typhoid or Scarlet Fevers, Measles or Whooping Cough.

TABLE 8.

ZYMOTIC DISEASES.									
	1887	1888	1889	1890	1891	1892	1893	1894	1895
No. of Deaths from Infectious Diseases	4	1	14	28	9	8	6	11	15
Death-rate per 1000 population	·61	·15	1·8	3·6	1·2	1·06	·79	1·45	1·92
Average Death-rate, 1887 to 1895 = 1·39.									

As will be seen from Table 8, this death-rate is somewhat high, being 0·53 above our average for the preceding eight years, and with the exception of the year 1890, when we had the excessively high rate of 3·6 (due to 22 deaths from Measles), this year is the highest of which I have any record, and is solely accounted for by the excessive mortality from Influenza, as without this disease there would only have been 4 deaths, from all the other Infectious Diseases, yielding the low rate of 0·6 per 1000, but even including the said deaths from Influenza, the rate is much below that for England generally.

ERYSIPELAS (0·12). During the year 2 cases of this disease were notified, one a very malignant case proving fatal. The disease shows a decline on former years, especially that of 1892.

DIPHTHERIA & MEMBRANEOUS CROUP (·38). Two cases of Diphtheria and three of Membraneous Croup, were notified during the year, one of the former and two of the latter proving fatal, and as this latter term is a somewhat ambiguous one, I have, following the example of the Registrar-General, included all the above 5 cases under the group "Diphtheria." The 3 deaths yield therefore a rate of ·38 per 1000. One of the cases of Diphtheria occurred in High Street, in April; the other being notified in August, in Kirk Lane; they had no connection with each other.

On the 24th of September a death was registered of a child in South View, New Scarbro,' the cause of death being certified as "Tracheitis" (Inflammation of the Windpipe), and on the 11th of October a case of Membraneous Croup was notified as occurring in another child, in the same house, the disease running a similar course to the former case, and unfortunately also ending fatally.

The houses in this Street have no proper disconnection from the the main drain.

On November 1st, a third case (also ending fatally) occurred in Leafield Terrace, New Scarbro,' and was also notified and certified as Membraneous Croup. Whether this case was traceable to the former ones I was not able to prove, but in any case from their proximity there was a suspicion of a similar source of infection.

Up to the present time there have been no further cases.

In the West Riding there were 572 cases of Dyphtheria during the 12 months, the numbers increasing towards the end of the year. I hope the West Riding Authorities will soon begin the Bacteriological Verification of Diphtheritic Outbreaks. It would be a great help to general Practitioners and Medical Officers of Health.

ENTERIC OR TYPHOID FEVER (0·0). During the last 12 months we have had a continuation of the outbreak of this disease, which, beginning in Well Hill, in 1893, with 4 cases and 1 death extended in 1894, and caused 15 cases with 4 deaths, and in 1895 a similar number of cases, viz : 15, but fortunately with no fatalities. During the last 3 years therefore we have had 34 cases of Enteric or Typhoid Fever, resulting in 5 deaths; a serious state of affairs. The 15 cases in 1895 occurred in 14 houses. Several of the cases were remarkable for the mild course the disease seemed to run, one or two of the patients not being confined to bed, but playing about the house, on some of the occasions in which this late Inspector and I myself visited the premises. Other cases however were of a very severe and prolonged nature.

A remarkable and pleasing difference to the results of 1894, was the absence of any deaths. During the year 1895, there were no fewer than 1573 cases of this disease, in the West Riding, the maximum of cases occurring in October.

Typhoid Fever, like Diphtheria, is a most difficult disease to trace to its source; and although in one or two instances, it was probable that the disease spread from one member of a family to another, still there was no absolute certainty as to the cause for so general an outbreak. With one, or two exceptions, the cases were widely separated from, and could have no connection with each other, as far as personal infection went.

One of the cases occurred in the same Street at New Scarbro', where the two deaths above mentioned, under the heading of Diphtheria took place. Another was in the same yard in Well Hill when 7 cases occurred in 1893—1894. Within the last 3 months of the year there were three cases in Alma Street, two cases occurred at Otley Lane End, and two in the adjacent Manor Terrace, one at Henshaw, and the other five at places remote from each other, and from any of the above.

On referring to Table 9 we find that the Disease was notified in 6 out of the 12 months, but chiefly in October (8 cases), which is the most prevalent season for Typhoid Fever, Diarrhœa and kindred diseases.

MILK SUPPLY. In the 14 case-houses the milk supply was got from seven different sources, and apparently had no connection with outbreak. Milk can only cause an outbreak of Typhoid Fever either through its being diluted with infected water, or by the direct addition to it of matter containing the specific Typhoid infection, and not from any known disease in the cow, whereas in Diphtheria, in addition to these two causes there may be a third, the result of a definite disease in the cow. The inflammatory affection in the cow's udder known as "Garget" is supposed to be capable of producing Diphtheria in man.

WATER SUPPLY. The public water supply has maintained its usual good quality (with a slight exception in June, when there was some muddy deposit), and could have nothing to do with the outbreak.

After, therefore eliminating the milk and water supplies as having nothing to do with the disease, we are again face to face with the fact that the most likely cause of the prolonged outbreak, must lie in defective or deficient sanitary conditions either with regard to drainage or foul and decomposing accumulations, aided perhaps by the unusual atmospheric and earth influences, especially in the months of September and October, viz. : excessive heat followed by excessive rains. Amongst other defects in the Sanitary arrangements of the above 14 case-houses, I found the following. In 3 houses, the waste pipe from the sink had an ineffective trap and was not disconnected outside; in 3 there was an absence of trap under the sink; in 2 there were filthy sink-stones inside the house; in 2 there were foul privies and ashpits close to door; in 1 there was a pig-stye a few feet from the house door. In 11 therefore out of the 14 houses there was some more or less gross sanitary defect.

As I remarked in my last Annual Report. "Even if sanitary defects of the above nature do not directly cause Typhoid Fever, they certainly increase the liability to such outbreaks." It is a well-known fact that a decline in Typhoid Fever has everywhere gone hand in hand with improved sanitation, and its presence or absence is therefore a good index to the existing conditions.

DIARRHŒA (0·12). This was very prevalent in September, and was due to the excessive heat during the last 3 weeks of the month. It affected old and young alike, and extended into October which was a wet and cold month; one death resulted.

SMALLPOX. No case of this disease occurred during the year. During this period there have been only 55 cases in the West Riding, and of this number only 7 have been reported since August.

SCARLET FEVER (0·0). Two cases were notified during the year. One at Henshaw in October, and one in Walker's Row in December, but although they were other children in the infected houses, no other cases occurred. No deaths resulted the cases evidently being of a mild nature. Scarlet Fever has been very prevalent in the West Riding during the year, especially in the later months of it there being as many as 5584 cases reported, so that we may consider ourselves fortunate in having no serious outbreak of the disease.

MEASLES. Many cases occurred during the year, especially in August. The chief factor in the spread of this disease being contact at school, many parents acting very carelessly in allowing children who had suffered from the disease, to return to school far too soon after the illness. Most cases of measles should be kept isolated for 3 to 4 weeks.

WHOOPING COUGH. This like the last disease was most prevalent in August, the two diseases very often running coincidently. No deaths resulted from either disease.

INFLUENZA (1·28). This disease first appeared towards the end of February when the weather was so severe, and rapidly increased, so that by the second week of March fully half of the population had suffered from the disease in a more or less degree. The chief symptoms were referred to the head in combination with Bronchitic troubles. This latter complication replaced to a great extent that of Inflammation of the lungs which has been so characteristic in epidemics of Influenza, in former years, notably that of 1893. This was a most remarkable feature of the 1895 outbreak. Another noteworthy point was that relapses (although a prominent feature of all Influenza epidemic) were much more common than formerly.

My former experience was again fully confirmed, viz. : that persons who had once suffered from Influenza are more liable than others to subsequent attacks.

The most important point however about the attack of this year (1895), and more noticeable than in any former outbreaks is the large number of fatalities, their being no fewer than 10 deaths recorded, yielding a death-rate of 1·28 per 1000. Of the 10 deaths, only one was the direct result of Influenza the others being due to complications, viz. : one from Pneumonia, five from Bronchitis, and one recorded as Influenza and Meningitis.

Let us hope that the country generally may escape so dreadful a visitation this year.

INFECTIOUS DISEASES (Notification) Act. During the year, 24 cases of Infectious Disease were notified under this act, a similar number to that of 1894. In 1893 there were 17 cases, and in 1892 there were 36 cases. As will be seen from table 9, 15 out of the 24 cases notified were due to Typhoid Fever, and of these 8 were reported in October.

TABLE 9.

NOTIFICATION OF DISEASES.													
	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Enteric (typhoid) Fever	2				1		1		2	8		1	15
Scarlet Fever										1		1	2
Diphtheria				1 (fatal)						1			2
Membranous Croup										2 (1 fatal)	1 (fatal)		3
Erysipelas			1 (fatal)					1					2
Total	2		1	1	1		1	1	2	12	1	2	24

The adoption of this act by your Authority in 1892, has been of great service in the early discovery of cases of Infectious Disease, and although there are in my opinion several weak points in the act still, I think your council did wisely in adopting it. Since then most of the Sanitary Authorities in the kingdom have adopted the act as is shown by the fact, that at the end of last year no less than 93 per cent. of the population of England and Wales were under compulsory notification of the eleven diseases included in it, several of these Authorities having added other diseases as well, such as Measles, Whooping Cough, Autumn Diarrhoea, and in one case even Hydrophobia. As to the expense in connection with it, surely that is infinitesimal when compared to the benefits resulting. As a writer in a paper recently said, "We may well wonder "when the community (composed as it is of those who systematically grumble at the heavy rates "of their resident localities) will wake up to the fact that the Prevention of disease rather than "its cure, is a matter of economy. This is not generally recognised. Pauperising of the bread "winners by sickness, raises the rates especially with regard to smallpox."

DISINFECTOR. I would again point out the utility of a proper steam disinfecter. These can be got nowadays much cheaper than formerly, and would save the otherwise unavoidable destruction of much valuable material after infectious diseases.

WATER-SUPPLY. The Secretary of the Waterworks Company, gives me the following particulars:—

The average quantity of water consumed per day in Yeadon, is about 150,000 gallons which is all filtered before delivery. The filtering material consisting of 2 feet of river sand on the top and 2 feet of fine broken stone below, arranged in graduated layers, from $\frac{1}{8}$ to 3 ins. in size. The total area of filtration at Reva has been increased since last year and now covers 5476 superficial feet, the rate of filtration being 75 gallons per square foot in 24 hours. The Reservoir at Reva is full (95,000,000 gallons), and in addition to this there is in the Yeadon Reservoir an auxiliary supply of 8,000,000 gallons. The average quantity supplied to Yeadon, Rawdon and Guiseley including the mills, amounts to 1,837,400 gallons per week. All the Rawdon supply passes through the Peacock filter before delivery.

I have analysed the water on several occasions during the year and found it of excellent quality, although in June there was an excessive muddy sediment on a few occasions. Its softness renders it liable to become plumbo-solvent, but so far this action has not been apparent. Much inconvenience was caused in February and March owing to the mains being frozen, some districts being without water for over seven weeks; a very serious—not to say dangerous—state of affairs, especially in houses provided with water closets. In many cases the mains are not laid deep enough.

DISTRICT WELLS. I can only repeat my recommendation of former years, viz.: "to close the lot." I have on several occasions during the year found some of these waters unfit for drinking purposes, and certainly not worth risking at any time when there is a good public water supply available. Continuing to use these well-waters is either the result of prejudice or of gross ignorance of their dangers.

DRAINAGE. Improvement has been made in general drainage work during the year, both as regards the opening up of blocked drains and the relaying of defective work. Several new gullies of efficient size and pattern have been put down. The pans of these want strict attention paid to them as regards cleaning out. As regards the dishes for slop-water, many householders still persist in ignoring them, preferring to throw their dish-water, etc., across the roadway, thereby adding in many instances to their already filthy condition.

During the year 36 house sinks have been trapped and disconnected from the drains by discharging into open gullies. Offenders in this respect are being gradually discovered and the defects remedied. Improvements has taken place in the spouting and re-spouting of houses, thereby adding to the comfort of passengers as well as to the health of the occupiers. I would recommend that as far as possible all fall-pipes which cannot discharge into the drains should have proper open pipes laid across the causeway to conduct the water into the road channels, instead of allowing the fall-pipes to discharge the roof water indiscriminately over the causeways. Complaints have been made in a few instances of surface water getting into the cellars of private houses. This, I believe, has been attended to.

SEWERAGE AND SEWAGE DISPOSAL. The sewers of the district are in good condition. A great improvement has been made at the bottom of Well Hill by the covering in of the small "beck." The floods at the end of June did good service in flushing all the drains and sewers of the district. I question if they ever had such a clearing before. Much damage was, however, done at the same time by the force of the waters, both to private and town's property.

With regard to the difficulty of disposing of the sewage of the low end of Yeadon and New Scarbro', it is satisfactory to know that an understanding has been come to with the Guiseley Council. It is well for neighbouring authorities to work in unison and help each other.

SEWAGE DISPOSAL. The method of treatment at the outfall has been the same as formerly, viz.: by the addition of quick-lime and subsequent settling in tanks. I hope that before long some other system equally economical and more beneficial may be tried.

LODGING HOUSES. These have been regularly inspected during the year. As regards their general condition of cleanliness they are just moderate. More than two years ago their number was reduced from 7 to 3, but during the year the erection of another has been sanctioned. Let this be the last. When the new "three-year-old" Byelaws become law, then we can enforce many points regarding Lodging Houses, but not until then.

SLAUGHTER HOUSES. Some of these have been kept in good condition: others only moderate. Thirteen is far too large a number for a town the size of Yeadon. In Leeds there are only ten times more, viz.: 130, whereas if in proportion to our population there would be nearly 600. I again repeat that a public slaughter house or abattoir, under the town's control, would be a great advance in Yeadon, both for the slaughterers and for the public.

COWSHEDS (38). Here again the number is excessive, being about one to every 205 inhabitants (besides those outside the district). Some of them are kept clean and well ventilated, others are dirty and have little or no ventilation, the want of the latter contributing to a great degree to unhealthiness in cows, and especially in producing that fatal disease "Tuberculosis."

UNSOUND FOOD. No seizure has been made during the year, but several complaints have been made regarding the condition of some of the fish brought into the town for consumption at the fried fish shops. It is a great pity that the laws regarding these places are not more stringent (as indeed they are certain to be before long); but in any case food unfit for human consumption can never be allowed to be used.

NUISANCES. At the end of 1894, five "nuisances" were left over to deal with in the following year (*i.e.*, in 1895), and in addition to these five, there were 39 reported of, making a total of 44 nuisances for the year past. Of these, 29 were abated, leaving 15 to carry forward to 1896. The nuisances chiefly referred to defects in closets or middens, and in a few cases to drainage. Legal proceedings were taken in two cases.

According to the latest estimate, the approximate number of the different kinds of closets in the town, are as follows:—water closets, 25; covered privy-middens, 600; uncovered privy-middens 200; the latter must be attended to as soon as possible. During the past year 24 covered privy-middens were erected, all being ventilated, which is a most important point.

The privy-middens are supposed to be cleaned out once a fortnight, but this, I fear, is not done as regularly as it ought to be, especially in some of the outlying districts, from which I get periodic complaints.

I would again draw your attention to a mistake made in the erection of privy-middens, and as this seems the only feasible method of disposal for Yeadon at present, it is desirable to make the system as efficient as possible. The fault referred to is that in many cases both the privy and the middens, but especially the latter, are allowed to be sunk below ground level. The proper plan is to make the floor of the middens at least three inches above the level of the ground; the floor of the privy below the seat 1 to 2 inches above that, and the floor proper of the privy another 3 inches higher than that again, with a slight slope towards the door. This would make the floor proper of the privy 7 to 8 inches above ground level. There must also be means of ventilation provided at the roof of the privy as well as the midden. All the floors of both of these should be well flagged and rendered inside with cement, so as to be absolutely water tight. Rain must be excluded, and there must be no connection with any drain. The size of both should also be reduced so that frequent cleaning would be imperative. If these rules were followed out, and no such erections allowed nearer than 10 feet from a dwelling, there would be less chance of the soil foundations of houses being impregnated with the soakage from such receptacles, and so endangering the lives or damaging the health of the inmates, which, I fear, is in many cases possible at present. The following out of such a plan would entail no more expense in the erection than at present, and would certainly make a system thoroughly bad in principle, more bearable, and at all events less insanitary than formerly.

PRIVATE ROADS. With reference to these I would again refer the Council to Clause 150 of the Public Health Act, which gives distinct instructions requiring "owners of " property abutting on any private street, or part of a street, to level, pave, sewer, and light, or " make good such street or part of a street, and, in case of default, the Sanitary Authority may " carry out the work, and recover the expenses from the owners according to the frontage of " their respective premises."

I congratulate the Council on their endeavours to improve one of the public streets by recently purchasing property, but in order to make any real impression on the improvement of the township as regards roads, it is absolutely essential that they take every means to alter the disgraceful condition of the private streets. No one need raise any objection (monetary or otherwise) to removing such nuisances as at present exists in this respect. Property is raised in value just in proportion to the amount expended on its improvement.

INSPECTIONS. During the year I have made 15 general inspections of the district, and 44 special inspections as occasions required. The various inspections of premises on the notification of infectious disease is the means of discovering many a defect which would otherwise never be heard of.

The Sanitary Committee has done good work throughout the year.

BYE-LAWS. These were drawn up two years ago, but I fear that by the time they are adopted they will again require revising in order to keep up to the times. I would recommend that the Local Government Board be again written to urging their completion.

PROVISIONAL ACTS. I would advise that the following Acts, which I have formerly recommended, be adopted :—

I. The Infectious Diseases (Prevention) Act, 1890.

This act amongst other things gives greater powers to Authorities in dealing with milk supplies, either from within or without the district, and as so much milk is brought into Yeadon from districts outside it, the adoption of this act would be of great service to the Authorities.

II. The Public Health Amendment Act, 1890.

This Act gives greater powers regarding sewers, closets, slaughter houses, &c.

RESUMÉ. The Death and Birth rates are satisfactory, the former especially so, being the lowest for many years.

The Infantile Death-rate is lower than usual and much below the average.

The deaths from the ordinary diseases show very satisfactory results with the exception of those from Phthisis and Cancer.

The Zymotic Death-rate is very satisfactory if we deduct the fatal results from Influenza, but above our average including that disease and although there are three deaths recorded under Diphtheria, this is counter-balanced by the fact that there have been no fatalities from Typhoid Fever, the unsatisfactory point regarding this disease being its excessive prevalence.

The Sanitary conditions of the township have been fully reported on under their various headings; many improvements in regard to lodging houses, cowsheds, slaughter houses, and general nuisances being held in abeyance until we have the proper bye-laws in action.

Although there are many points referred to in the Report which show that stricter attention is required, still I think that, generally considered, the Report is to be considered satisfactory.

I am,

Gentlemen,

Your obedient servant,

CHAS. J. R. MCLEAN,

M.D. EDIN., M.CH., D.P.H.,

MEDICAL OFFICER OF HEALTH.

TWEED HOUSE, YEADON,

5th Feb., 1890.

(A) TABLE OF DEATHS during the year 1895, in the YEADON URBAN SANITARY DISTRICT, classified according to DISEASES, AGES and LOCALITIES.

[illegible]

The subjoined numbers have also been taken into account in judging of the above records of mortality.

Deaths occurring outside the district among persons belonging thereto. 4.

Deaths occurring within the district among persons not belonging thereto. 5.

Area and Population of the District or Division to which this Return relates.

Area in Acres, 1723. Population (1801), 7396.

6th February, 1896.

CHAS. J. R. MCLEAN, *Medical Officer of Health.*

(B) TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, *owing to the knowledge of the Medical Officer of Health, during the year 1895, in the YEADON URBAN SANITARY DISTRICT: classified according to DISEASES, AGES and LOCALITIES.*

[illegible]

State here whether "Notified" or "Notifiable" in the District, and state where it is situated. **None.**

Since when? April, 1892.

ct.

Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that occur in the District. Mark (H) the Locality in which such Hospital is situated; and if not within the District,

TABLE C. 1895.

YEADON URBAN SANITARY DISTRICT.

Medical Officer of Health: CHAS. J. R. McLEAN, M.D., M.Ch., D.P.H.

Term of Appointment, **One Year.** Present Salary, **£40.** Special Reports presented during 1895—Subject, **None.**

Sanitary Inspector, **Clifton Lund.** Salary, **£60.** Ratable Value (1895) for Poor Rate, **£21,077 4s. 9d.**

Rateable Value (1895) for General District Rate, **£18,280 15s. 4½d.** General District Rate (1895–6).

Water Supply.—Any extension or change during 1895? **None.** Average daily consumption per head? **19·2 Gallons.**
Action on Lead? **None.**

Sewerage and Sewage Disposal.—Extension or Improvements during 1895? **None during 1895.—Improvements commenced January 1895.**

Scavenging.—Are the privy middens, &c., cleansed by sanitary staff, by contractors, or by tenants? **Removed by Contract.** Frequency? **Two weeks.** Annual Cost? **£110.** Is the present arrangement satisfactory? **Yes.**

Bye-Laws, Regulations and Adoptive Acts.—Infectious Disease Notification Act, 1889. Adopted, **April 1892.**
Infectious Disease Prevention Act, 1890, **Recommended, 1893, 1894 and 1895.** Public Health Acts Amendment Act, 1890. **Recommended 1893, 1894 and 1895.** Regulations under the Dairies, Cowsheds, and Milkshops Orders, **Bye-Laws in process of adoption, 1893–94.**

REGULATED BUILDINGS, TRADES. &c.	Number.		General Condition?	Legal Proceedings (if any)
	Registered	Inspected		
Common Lodging Houses	2	—	Moderate	None.
Canal Boats	0	0		
Slaughter Houses	13	13	Moderate	
Bakehouses	0	0		
{ Dairies	0	0		
{ Cowsheds	38	38	Moderate	
{ Milkshops	0	0		
Offensive Trades	0	0		
(Please specify nature).				

Schemes before **L. G. B.**—**None**, except New Bye-laws, 1893–94. L. G. B. Enquiries, **None.** L. G. B. Inspections **None.**

Births.—(a) Number of each sex :—**Males, 118. Females, 122.** (b) Number Illegitimate, **7, 2 Males and 5 Females.**

Deaths.—(a) Number of each sex :—**Males, 53. Females, 58.** (b) Number Uncertified, **3 (—1—4 Coroner's Certificate)**

Death Returns—What correction (if any) is made for non-residents dying within the District? **Five Persons.** Are any Returns obtained of deaths of residents occurring in public institutions (Workhouses, Hospitals, &c.), outside the District? **Four Persons.**

Hospital for Infectious Diseases.—Number of Beds, **0.** Charges to Patients, **0.** Additions or Alterations, during 1895, **0,**
What Diseases are admitted? **0.** How many different Diseases at one time? **0.**

Disinfection.—Apparatus (Steam? Hot-air?) **0.**

Sanitary Work—Number of Houses built during 1895, **7, Re-constructed 10.** House to House Inspection during 1895, **0.** Total Number of Nuisances in hand at close of 1894, **5,** At close of 1895, **15.** Reported during 1895, **39,** Abated during 1895, **29.** Total Number of Summonses, or other Legal Proceedings, **2.** House Drainage :—Number of Sinks disconnected during 1895, **36.** Number of Sinks trapped during 1895, **36.** Closets—Approximate Number of each kind in District—W.C. **25.** Trough-C., **0.** Slop-C. (Waste-water C.) **0.** Pail, Pan or Tub-C. **0.** Covered Privy Middens, **600.** Uncovered Privy-Middens **200.** Number constructed during 1894, **24.** Kinds, **Covered and Ventilated.**

What action has been taken in regard to the following matters?

Houses unfit for habitation, **0.** Overcrowding, **0.** Seizure of Unsound Food, **0.** Prosecutions, **0.** Samples taken under the Sale of Food and Drugs Acts, **0.** Prosecutions, **0.** River Pollution, **0.** Smoke Abatement, **0.** Workshops, **0.**

Please append Copy of Report of Inspector of Nuisances if possible.

YEADON

URBAN DISTRICT COUNCIL.

MEDICAL OFFICER'S

ANNUAL REPORT,

1895.

SIGNED,
CHAS. J. R. MCLEAN, M.D. EDIN., M.CH., D.P.H.
MEDICAL OFFICER OF HEALTH.

TWEED HOUSE, YEADON
5th Februar, 1896.

William Walmsley, Printer, &c., West Bar, Yeadon.